24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Ending Spending Action Fund	
	C C00489856
Check if X 24-hour report 48-hour report New report Amends report filed	i on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
CD, Inc.	04 29 2014
Mailing Address P. O. Box 1877	04 29 2014 Amount
City State Zip Code	7500.00
Alexandria VA 22313	Transaction ID : SE.5396 Date of Disbursement or Obligation
Purpose of Expenditure online advertising Category/ Type	04 / 21 / 2014
Name of Federal Candidate Support Office	e Sought: X House District: 03
William Taylor Griffin Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: X Primary General Other (specify) ▶
Full Name of Payee CD, Inc.	Date of Public Distribution/Dissemination
Moiling Address	04 29 2014
Mailing Address P. O. Box 1877	Amount
City State Zip Code	7500.00
Alexandria VA 22313	Transaction ID : SE.5397 Date of Disbursement or Obligation
Purpose of Expenditure online advertising Category/ Type	04 / 21 / Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: X House District: 03
Walter B. Jones Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	15000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
2 4.10	04 29 2014
Signature	